

Current Lic. No. \_\_\_\_\_

STATE OF LOUISIANA  
**RECREATIONAL AND USED MOTOR VEHICLE COMMISSION**  
3132 VALLEY CREEK DRIVE  
BATON ROUGE, LOUISIANA 70808  
(225) 925-3870 FAX # (225) 925-3869  
www.lrumvc.state.la.us

FOR OFFICE USE ONLY

RECEIPT NO. \_\_\_\_\_

LICENSE NO. \_\_\_\_\_

DATE ISSUED \_\_\_\_\_

**APPLICATION FOR LICENSE AS MOTOR VEHICLE CRUSHER FOR YEAR 20\_\_\_\_\_**

PLEASE PRINT OR TYPE. Complete entire application and attach such documents as required. Any misrepresentation or omission of information shall be grounds for refusal to issue or revocation of a Motor Vehicle Crusher License.

OWNERSHIP NAME \_\_\_\_\_  
(Name of Individual, Partnership, Corporation, LLC or LLP)

DEALERSHIP NAME \_\_\_\_\_ PHONE ( ) \_\_\_\_\_  
(Name Under Which Business Will Be Conducted)

OFFICE HOURS \_\_\_\_\_ DAYS \_\_\_\_\_

BUSINESS LOCATION \_\_\_\_\_ CITY \_\_\_\_\_ PARISH \_\_\_\_\_ ZIP \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
(If Different From Above)

**OWNERSHIP INFORMATION:**

NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
(Individual, Managing Partner or President of Corporation)

CELLULAR PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

U.S. CITIZEN? YES ☐ NO ☐ IF NOT A U.S. CITIZEN, ATTACH COPY OF RESIDENT ALIEN CARD (FRONT AND BACK) AND DRIVER'S LICENSE.

YES NO

☐ ☐ HAVE YOU EVER BEEN CONVICTED OR PLED GUILTY TO ANY CRIME OTHER THAN A TRAFFIC VIOLATION IN THE PAST 5 YEARS? IF YES, STATE INDIVIDUAL'S NAME, OFFENSE AND WHERE. \_\_\_\_\_

DATE BUSINESS WAS ESTABLISHED \_\_\_\_\_

**AN ESTABLISHED PLACE OF BUSINESS SHALL:**

- A. HAVE A PERMANENTLY AFFIXED SIGN LISTING THE TRADE NAME. THE SIGN MUST BE PLACED IN FRONT OF THE BUSINESS AND CLEARLY VISIBLE FROM THE STREET OR ROADWAY AND A MINIMUM OF 16 SQUARE FEET (4' X 4') AND SUBJECT TO ALL ZONING LAWS.
- B. HAVE A BUSINESS TELEPHONE LISTED IN THE BUSINESS NAME AS LISTED ON THE APPLICATION.
- C. MUST COMPLY WITH THE LOCAL ZONING LAWS.

I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I AM FAMILIAR AND WILL ABIDE WITH THE PROVISIONS OF ALL THE LAWS, RULES AND REGULATIONS UNDER WHICH THIS APPLICATION IS MADE.

CRUSHER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Individual, Managing Partner, President of Corporation or Duly Authorized Representative)

ANY FALSE ANSWER IS A CRIMINAL OFFENSE SUBJECT TO A FINE NOT TO EXCEED \$5,000.00 OR IMPRISONMENT NOT TO EXCEED 4 YEARS OR BOTH.

SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20 \_\_\_\_\_

NOTARY PUBLIC SIGNATURE/COMMISSION STAFF \_\_\_\_\_

ATTACH COPIES OF ARTICLES OF PARTNERSHIP, ARTICLES OF LIMITED LIABILITY CORPORATION OR ARTICLES OF INCORPORATION AS REQUIRED AND APPLICABLE.

ATTACH CHECK TO COVER \$200.00 LICENSE FEE.

ATTACH CHECK FOR \$35.00 TO COVER CRIMINAL RECORD CHECK, IF APPLICABLE.

MAKE CHECK PAYABLE TO: LOUISIANA RECREATIONAL AND USED MOTOR VEHICLE COMMISSION.

MAIL COMPLETED FORM, FEES AND ATTACHMENTS TO ADDRESS LISTED ON THE TOP OF THIS APPLICATION.

**PURSUANT TO THE AMERICANS WITH DISABILITIES ACT, ASSISTANCE WILL BE PROVIDED IN COMPLETING ANY FORMS REQUIRED BY THE LOUISIANA RECREATIONAL AND USED MOTOR VEHICLE COMMISSION.**